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## APPLICANTS

Shinichi Takamoto, Tokyo-to, JAPAN;  
 Yoshihiro Suematsu, Tokyo-to, JAPAN;  
 Hiroaki Tanabe, Tokyo-to, JAPAN;  
 Hideaki Kataoka, Osaka-shi, JAPAN;  
 Katsuya Miyagawa, Osaka-shi, JAPAN;  
 Akifumi Yoneda, Osaka-shi, JAPAN;

\*\* CONTINUING DATA \*\*\*\*\*

NONE

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

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IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWING</b> 12	<b>TOTAL CLAIMS</b> 6	<b>INDEPENDENT CLAIMS</b> 1
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature <i>[Signature]</i>	Initials		

## ADDRESS

020374

## TITLE

Graft grasping device

<b>FILING FEE RECEIVED</b> 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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